GD-083-PHS-EMS: Drug Profile for Lorazepam
This is the Arizona Department of Health Services' recommendation for the use of this drug in the prehospital setting.

GENERIC NAME: **LORAZEPAM**

CLASS: Antianxiety
Benzodiazepine, short or intermediate acting

Mechanism of Action:

Agent binds highly to the gamma-amino butyric acid (GABA) benzodiazepine receptor complex without displacing GABA. It exerts tranquilizing action on the central nervous system.

Indications and Field Use:

Status epilepticus
Anxiety
Alcohol withdrawal syndrome
Nausea and vomiting

Contraindications:

- Known sensitivity to the benzodiazepines
- Acute narrow angle glaucoma or myasthenia gravis
- Known hypersensitivity to polyethylene glycol, propylene glycol, or benzyl alcohol

Adverse Reactions:

- Most frequent adverse reaction is sedation
- Transient amnesia or memory impairment
- Dizziness
- Headache

NOTES ON ADMINISTRATION

Incompatibilities/Drug Interactions:

Concomitant use of CNS drugs such as phenothiazines, narcotic analgesics, barbiturates, antidepressants, and alcohol should be assessed prior to administration of IV Lorazepam

Adult Dosage:

Status epilepticus: 2mg to 4mg IV given slowly (2mg/minute) May repeat dose in 10-15 minutes if needed. (Maximum 8mg)

Pediatric Dosage:

Status epilepticus: 0.05-0.1 mg/kg IV (Maximum 4mg dose)

Routes of Administration:

IV injection is the route of choice

Onset of Action:

1-2 minutes if given IV

Peak Effects:

<15 minutes when given IV
Within 3 hours when given IM

Duration of Action:

Approximately 8 hours when given IV

Dosage Forms/Packaging:

Injection Solution: 2mg/mL, 4mg/mL

Special Notes:

Care must be used when administering Lorazepam IV to elderly patients, seriously ill patients, and those with limited pulmonary reserve. Apnea and/or cardiac arrest may occur. Patients over the age of 50 years may have a more profound and prolonged sedation with IV Lorazepam.
All patients should be monitored for respiratory depression and hypotensive effects.